De Not Write Above This Line—For Headquarters Office Only APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(5) 1. TYPE(S) OF LICENSE(S) FILE NO. To: Department of Alcoholic Beverage Control RECEIPT NO. 1901 Broadway 11.36 On Sale Beer and Wine Sacramento, Calif. 95818 Stockton GEOGRAPHICAL **CODE** 3902 Rating Place Data The undersigned hereby applies for licenses described as follows: Temp. Permit Temp. Permit 2. NAME(S) OF APPLICANT(S) Applied under Sec. 24044 MAK, Miu Wah Ping & Yiu Hung Effective Dote: Effective Dote: \* Issuance 3 TYPE(S) OF TRANSACTION(S) FEE 300.00 ORIGINAL 41 197.00 Annual Fee →. Name of Business Lucky House 5. Location of Business-Number and Street 550 S. Cherokee Lane, Ste H City and Zip Code County TOTAL 497.00 Lodi 95240 San Joaquin 6. If Premises Licensed. 7. Are Premises Inside Show Type of License City Limits? 41 (Temp) (Perm) 8. Mailing Address (if different from 5)-Number and Street Same Perm 10. Have you ever violated any of the provisions of the Alcoholic 9. Have you ever been convicted of a felony? Beverage Control Act or regulations of the Department pertaining to the Act? No 11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application. 12. Applicant agrees (a) that any manager employed in ori-sale licensed premises will have all the qualifications of a licensee, and (b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act. 13. STATE OF CALIFORNIA County of \_\_\_\_\_Dote\_\_7-28-88 Under penalty of perjury, each person whose signature appears below, certifies and soys: (3) He is the applicant, or on of the applicant, or on executive officer of the applicant carporation, named in the foregoing application, duly outhorized to make this application on its behalf; (2) that he has read the foregoing application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' business to be conducted under the license(s) for which this application is made; (4) that the transfer application or not made to solisfy the payment of a loan or to fulfill on agreement entered into more than interty (90) days preceding the 1 y on which the transfer application is filled with the Department or to gain or establish a preference to or for one creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the ficensee with no resulting flability to the Decortment 14. APPLICANT SIGN HERE X APPLICATION BY TRANSFEROR 15. STATE OF CALIFORNIA County of \_\_\_\_\_ \_Date \_ Under penalty of perjury, each person whose signature appears below, certifies and says (1). He is the licensee, or on executive officer of the corporate Nemseer, named in the foregoing transfer application, duly authorized to make this transfer application on its behalf; (2) that he hereby makes application to surrender of ill interest in the attacked license(s) described below and to transfer same to the applicant and/or location indicated on the upper parties of this application form, if such transfer is approved by the Director; (3) that the transfer application or proposed transfer is not mode to satisfy the payment of a loan or to fulfish an appearance of the application of the properties of the with the Department entered into more than ninety days preceding the day on which the transfer application is filled with the Department or to goin or stabilish as preference to or for any creditor of transferor or to defraud or injure any creditor of transferor application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department. 17. Signature(s) of Licensee(s) 18. License Number(s) 16. Name(s) of Licensee(s) City and Zip Code Number and Street Do Not Write Below This Line; For Department Use Only Attached: . Recorded notice, Fiduciary papers, COPIES MAILED \_\_\_ 7-29-88 (OTHER) Renewal: Fee of Paid at

ABC 211 (1-82)

APPLICATION FOR ALCOHOLIC BEVERAGE LI	CENSE(S) 1. TYPE(S) OF LICENSE(S)		NO.	
For Department of Alcoholic Beverage Control.		RECE	RECEIPT NO. 733 GEOGRAPHICAL CODE 3902	
1901 Broadway Stockton	On Sale General			
Socromento, Calif. 95813				
The undersigned hereby applies for		Date		
licenses described as follows:			Issued	
2. NAME(S) OF APPLICANT(S)		Temp	. Permit	
2	Applied under Sec. 24044	-   ·		
LODI SPORTS CORPORATION, INC.	Effective Date: Issuarice	- 1	tive Date:	
	3. TYPE(S) OF TRANSACTION(S)		FEE	LIC.
	Day As Say		\$ 1,250,00	TYPE
	Per to Per		1,250.00	48
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		. * * ; * * * *		
Name of Business Loci Sport Club				
5. location of Businerr-Number and Street				
114 N. Sacramento Street				
City and Zip Code Count		TOTAL	\$ 1,250,00	
Lodi, 95240 San Joac 6. If Premises Licensed,	7. Are Pr	emises Insid	.1	<u>.                                    </u>
Show Type of License 48		mits? Yes		
<ol> <li>Moiling Address (if different from 5)—Number and Same</li> </ol>	d Street		region (Ten	rp) (Per
9. Have you ever been convicted of a felony?  # Corporation	10. Have you ever violated an Beverage Control Act or a taining to the Act?			
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